

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

### 1. Person Making the Disbursements/Obligations

(a) Name

U.S. Chamber of Commerce

(b) Address (number and street) ☐ check if different than previously reported

1615 H Street, NW

(c) City, State and ZIP Code

Washington DC 20062

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

030001101

### 3. Is This Statement

☒ New

or

☐ Amended

### 4. Covering Period

09' 31' 2010

through

09' 08' 2010

### 5. (a) Date of Public Distribution(s)

09' 08' 2010

(b) Communication Title "Can't Work" TV ad - Bakerfield

### 6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) ☐ Other, specify: \_\_\_\_\_

### 7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes ☐ No ☐

### 8. Custodian of Records

(a) Name

James W. Robinson

(b) Address (number and street)

1615 H Street, NW

(c) City, State and ZIP Code

Washington DC 20062

(d) Name of Employer or Principal Place of Business

U.S. Chamber of Commerce

(e) Occupation

Senior Vice President

### 9. Total Donations This Statement

0

### 10. Total Disbursements/Obligations This Statement

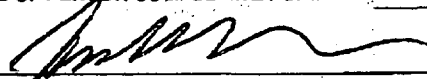
90,756.50

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

James W. Robinson

SIGNATURE



DATE

Sept 8, 2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 6437g.

FEC FORM 9 (REV. 12/2007)

**List of Person(s) Sharing/Exercising Control**  
(use additional pages as necessary)

PAGE 2 OF 3

**11. Person(s) Sharing/Exercising Control**

<b>A.</b>	(a) Name Bill Miller	(e) Occupation Senior Vice President
	(b) Address (number and street) 1615 H Street, NW	
	(c) City, State and ZIP Code Washington DC 20062	
	(d) Name of Employer or Principal Place of Business U.S. Chamber of Commerce	
<b>B.</b>	(a) Name James W. Robinson	(e) Occupation Senior Vice President
	(b) Address (number and street) 1615 H Street, NW	
	(c) City, State and ZIP Code Washington, DC 20062	
	(d) Name of Employer or Principal Place of Business U.S. Chamber of Commerce	
<b>C.</b>	(a) Name	(e) Occupation
	(b) Address (number and street)	
	(c) City, State and ZIP Code	
	(d) Name of Employer or Principal Place of Business	
<b>D.</b>	(a) Name	(e) Occupation
	(b) Address (number and street)	
	(c) City, State and ZIP Code	
	(d) Name of Employer or Principal Place of Business	
<b>E.</b>	(a) Name	(e) Occupation
	(b) Address (number and street)	
	(c) City, State and ZIP Code	
	(d) Name of Employer or Principal Place of Business	

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligation(s)**

PAGE 3 OF 3

<b>A. Full Name (Last, First, Middle Initial) of Payee</b> Mentzer Media				<b>Date of Disbursement or Obligation</b> 08/31/2010	
<b>Mailing Address of Payee</b> 600 Fairmount Avenue				<b>Amount</b> 80,000.00	
<b>City</b> Towson		<b>State</b> MD		<b>Zip Code</b> 21286	
<b>Name of Employer</b> Occupation				<b>Communication Date</b> 09/08/2010	
<b>Purpose of Disbursement (Including title(s) of communication(s))</b> "Can't Work" TV ad - Bakersfield					
<b>Name of Federal Candidate</b> Barbara Boxer		<b>Office Sought</b> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>Name of Federal Candidate</b> _____		<b>Office Sought</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>Name of Federal Candidate</b> _____		<b>Office Sought</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>B. Full Name (Last, First, Middle Initial) of Payee</b> McCarthy Marcus Hennings					
<b>Mailing Address of Payee</b> 1850 M Street, NW, Suite 235					
<b>City</b> Washington		<b>State</b> DC		<b>Zip Code</b> 20036	
<b>Name of Employer</b> Occupation				<b>Date of Disbursement or Obligation</b> 09/07/2010	
<b>Amount</b> 10,756.50					
<b>Communication Date</b> 09/08/2010					
<b>Purpose of Disbursement (Including title(s) of communication(s))</b> "Can't Work" TV ad - Bakersfield					
<b>Name of Federal Candidate</b> Barbara Boxer		<b>Office Sought</b> <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>Name of Federal Candidate</b> _____		<b>Office Sought</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>Name of Federal Candidate</b> _____		<b>Office Sought</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<b>SUBTOTAL of Disbursements/Obligations This Page (optional)</b>					
90,756.50					
<b>TOTAL This Period (last page this line number only)</b> (carry total from last page to Line 10)					
90,756.50					

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
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<input type="checkbox"/> No Postmark	
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